

TO PHYSICIANS, SURGEONS, AND THEIR PATIENTS THIS LITTLE WORK  
IS RESPECTFULLY DEDICATED.

# MECHANOTHERAPY ;

OR,

## THE SWEDISH MOVEMENT CURE

AS A REMEDY FOR ACUTE AND CHRONIC DISEASES.

*(Even Embracing Massage.)*

CONCISELY SET FORTH BY

PROF. A. G. BERGLIND, M.D.,

*Member of the Royal Society of Swedish Physicians and General Union  
of Physicians of St. Petersburg.*

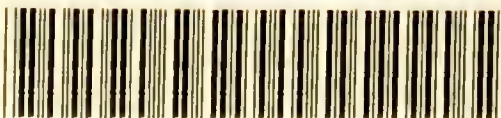


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# MECHANOTHERAPY;

OR, THE SWEDISH MOVEMENT CURE.

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The Swedish Movement Cure is known under different names in different countries ; as, for instance, medical gymnastics, mechanotherapy, kinesipathy, kinesitherapy, manual treatment, and even massage.

Its object is to strengthen or restore the health, and the means used are movements which are either performed by the patient himself (muscular movements), or are administered to the body of the patient by some outside power while the patient remains passive (passive movements, manipulations).

In most of the occupations of daily life only certain muscles of the body are brought into exercise. Such an uneven division of work is allotted to the muscles of different parts of the body more or less in all kinds of professional work. The more people become specialists in their professions, the more they expose themselves to the inconvenience of having certain parts of the body constantly overworked, while other parts are left inactive ; and still more specialities are continually being developed nowadays.

In Stockholm there is a college (The Royal Central Gymnastic Institute) founded by the Government, where a two or three years' course trains people to take charge of the physical development of the pupils of the public schools, and to cure diseases by means of the Movement Cure. At this institute instruction is given in anatomy, physiology, pathology, hygiene, and the specific effects of the movements, &c., besides practical drills at the clinique held at the institute.

The Movement Cure, which is founded on anatomy, physiology and pathology, has, during the last few decenniums, been considerably developed in accordance with the recent development of medical science ; with our present social conditions it is destined not only to be used alone, but also together with internal medicine and surgical treatment, whose effect it is often able to aid effectively. After operations and the protracted use of bandages, the Movement Cure is of inestimable value as subsequent treatment, especially after immobilisation, to strengthen certain parts of the body, and to accelerate the return of mobility to the joints. Not unfrequently the movement cure has proved to be effective in cases



where little or nothing could be accomplished by the use of medicaments or other treatment.

Owing to experience gained not only at the clinique of the Royal Institute in Stockholm, but also in private institutions for the Movement Cure, and through the observations of several physicians, who have especially devoted their attention to treatment by the Movement Cure, it is now used with great advantage for several diseases, in whose treatment its advantageous results were never before taken into account, and it is quite probable that in course of time still more diseases will come within the scope of this treatment.

The Movement Cure (Mechanotherapy) embraces, as I have already mentioned, three large groups of movements, namely, 1, active muscle movements; 2, passive movements (joint movements); and 3, certain manipulations. All these movements have the important property that they are capable of being strictly regulated as to their strength, of being accurately localised, as to the extent of their effect, and of having the mode of their administration strictly suited to the organs of the body and their functions. This contributes also to the fact that the Movement Cure is among the most comprehensive cures, and one most agreeable for the patient.

The active muscle movements, which often consist of so-called "resisting movements," are performed by the will and physical exertion of the patient. If they are performed by resistance there may be two ways, namely: so that either the patient performs the movement, the doctor's resistance being accommodated to the patient's strength, the muscular fibres contracting and the muscle being shortened, while the attachments of the muscle approach each other; or the doctor performs the movement while the patient gives a slowly yielding resistance. In the latter case the contracted muscles are extended and the attachments are removed from each other. In the former case the movement is called *concentric* resisting (duplicated) movement, by which the contracting power of the muscle is increased, but in the latter case the movement is called *excentric* resisting (duplicated) movement, by which the elasticity or tensility of the muscle is increased, and the muscle is strengthened. An example of this may be given if the patient bends his elbow while the doctor makes a gradually yielding resistance at the wrist from the inner side of the arm (concentric movement), or if the doctor holding the wrist at the same place stretches out the patient's bent arm while the patient slowly yields to the extension of the muscle (excentric movement).

Passive movements are those where the patient is perfectly inactive (involuntary) and where there is no contraction of the muscles, but only a passive movement and change in the position of the muscles. The majority of these are joint

movements, and are often intended to increase flexibility in the joints, but may also have other effects, partly on the blood-vessels, and partly on several internal organs.

The third group, **manipulations**, consists of certain specific effects brought about by the doctor on the patient's skin, blood-vessels, nerves, muscles, &c. These manipulations consist essentially in stroking, kneading, vibrating, hacking, shaking, pressing, &c., and are what is called **massage**, which is, however, only a part of the **Movement Cure**. This massage (in its restricted meaning) has of late been considerably developed and used as a special method of treatment. But all these manipulations have, however, already been employed more than 60 years in the **Movement Cure** in Sweden, where **Ling** used them, although seldom as now, on the bare skin, and not in the extensive application in so many diseases as the recent medical development has given them.

But I venture to say, not only through my own, but through others' experience, that these manipulations (massage) used alone without the aid of movements, active or passive, are in many cases not sufficient entirely to cure certain diseases, even as the movements must frequently be aided by certain manipulations. He who does not know the **Movement Cure** in its whole compass, embracing not only passive and active movements but the manipulations used in massage, finds it difficult to attain as good results as he who understands how to make proper use of these three groups of movements mentioned above. In order to gain a perfect result with the **Movement Cure**, and at the same time render it pleasant for the patient, it is necessary to have, not only an accurate theoretical knowledge of the use of the movements and manipulations, but the ability to administer them correctly, which is not always as easy as many might suppose. In short, it requires an innate talent to administer the **Movement Cure** properly. It is with this as with the musician's talent in bringing forth soft, pleasing, and pure tones on an instrument. Many people may work long in the musician's art, but still seldom get so far that they have the same touch as some more talented artist. So, in the **Movement Cure** it is very important to find the soft and skilful hand, which is able perfectly to adapt itself to the patient's individual peculiarity. What one doctor can accomplish in the **Movement Cure** with a skilful hand, another doctor cannot accomplish, notwithstanding his best intentions and exertions. Dr. Levin, of Stockholm, even cites cases where the effect of a movement was different when administered by different assistants. It is necessary to realise, and understand how to adapt both the form, strength, and endurance of the movement in the treatment of different patients. In this, I may say, much depends upon the ability to individualise.



Many who have not tried this, will find it difficult to comprehend the importance of discrimination and the difference of result in the treatment depending upon it.

By such an ability to individualise, the Movement Cure, administered by an experienced and trained hand, can, as well in a sure as in a strong and reliable effect, vie with all other methods of treatment; but it is a very trying treatment for the doctor.

To many it may seem surprising that the Movement Cure can be so beneficial in the treatment of diseases, by restoring health to the sick even after many other cures have been tried in vain. Experience is what finally estimates the usefulness of a remedy by its results. There is many a chemical remedy whose mode of operation is a perfectly enigmatic secret, compelling us to judge only from what experience shows. But this is not the case with the Movement Cure, whose nature and manner of operation can, in many instances, be comprehended even without very profound physiological or medical knowledge. Without here entering into any complete explication of the physiological foundation of the Movement Cure, I will only give a few plain suggestions which may lead to an insight into its effects, and promote further consideration.

The human body with its many organs is intended for activity and work. Every organ by proper activity maintains its health and well-being. Overwork as well as absolute rest or inactivity causes a drawback to its welfare and normal condition. Such a disturbance in one or several organs, often produces a disturbed equilibrium throughout the whole organism,—a condition which we call disease.

This condition has its internal cause, its physiological explanation, in the law for the exchange of matter in living animal bodies, which is now tolerably well known to science. According to this law, every living animal body, and likewise every part of it, is engaged in a constant renewal of all its constituent parts; every chemical molecule is allowed to remain only a certain limited time in the body; when it must be removed to be replaced by a new. In the human body this exchange of matter usually takes place slowly, and almost imperceptibly, yet surely and uninterruptedly. If it were not for this exchange of matter, the adult would need no food, for the purpose of food is to furnish the supply of material which the body needs for its constant regeneration. Every one knows that we cannot dispense with food for any great length of time without getting lean or losing in weight. This loss in weight shows that the body consumes itself. This self-destruction of the body takes place by means of a chemical process which is called combustion, forming essentially the same products as in every other combustion; namely, carbonic acid, water, and ashes. These products of combustion are removed from the body by



means of the excretions of the lungs, the skin, and the kidneys. This combustion produces heat the same as any other combustion.

This process of combustion takes place in all parts, organs, and tissues of the body, with the exception of the hair, nails, and epidermis, which parts are protruded from the body and thus pass off in a mechanical instead of in a chemical way; but the decomposition takes place with greater or lesser rapidity in different tissues. But as this exchange of matter is normally different in different tissues, it may also be disturbed, and take place either too rapidly or too slowly. It takes place too rapidly in all fevers, and appears in the form of increased heat and subsequent loss of flesh. It takes place too slowly, either in certain parts of the body or throughout the whole organism, in several chronic diseases, and makes its appearance in the form of reduced warmth in the body, and a reduced demand for food. It is also quite probable that most local diseases depend upon a local disturbance in the exchange of matter.

In animal life the chief object of a normal exchange of matter in the body is thus to preserve health or to recover it when once lost. To promote such an exchange of matter, a well regulated activity of the organs of the body is quite necessary. Certain organs of the body are with or against our will in constant activity, for instance, the heart, with all its diverging blood-vessels, the lungs, and more or less, the digestive organs with their nerves, etc. But there is also a large system of organs, multifarious in its composition, which can by no means act without our will, and this system consists of all the voluntary muscles, with all the nerves which regulate the action of these muscles, and the bones and tendons which are set in motion by their action. These muscles, nerves, and bones, constitute quite a considerable portion of our body,—yes, they may be estimated at least as nine-tenths of the weight or volume of the body. And how is it possible that the organism should be able to keep healthy and normal, if this considerable part of it, which is intended for activity and work, is left inactive? Our social conditions, especially in the cities, cause the voluntary muscular activity of a great many people to be confined to a minimum.

Thus, for instance, the government official, the clerk, the school-teacher, etc., who only have so much general musole work that in the morning they go to the office or the school-room and in the evening return home. On the other hand a few groups of muscles are over-worked in these occupations by a one-sided work through which their nerves are over-excited so that neuralgic pains are brought on, not infrequently accompanied by cramps or lameness in the affected muscles.

With the muscle activity which takes place in the Move-

ment Cure, the exchange of matter is more perfect, since the muscles act in their whole extent so that they are more perfectly inflected and extended; besides, the nervous activity of the patient is brought more into demand through the attention and exertion of the will, which he must use in performing the movements; thus a beneficial and a stronger exchange of matter is brought about even in the nervous system. The chemical decomposition which takes place in muscular activity, involves generation of heat, and makes its appearance in the formation of carbonic acid, lactic acid, and other products of combustion, which when accumulated in considerable quantity in the muscle, cause a tired feeling which only ceases when these products have been carried away by the blood or the lymph, which removal is very much promoted by certain manipulations.

In the chemical process which takes place in the working muscle, a certain portion of the muscle's substance is consumed, but this consumption is made good as is always the case in the body by the influx of blood which leaves new nutriment. Thus the effect of muscular activity is **an increased consumption of blood**. But the quantity of blood in the body cannot suffer any diminution, wherefore it tries to get compensation through new supply. The sources of the blood are the lymphatic ducts, in which there will consequently be a stronger current toward the blood vessels. But the lymphatic ducts get their needs essentially supplied by the digested food in the alimentary canal. Thus the effect of the work of the muscles will be **an increased demand for food**.

The fact that work gives appetite was known by experience before it was proclaimed by physiology. But the material which the lymph brings the blood is not yet completely formed blood. In order to be so, it must be carried in the blood to the heart, and by the heart be driven to the lungs, where, by contact with the air, it is oxygenised and renovated. Thus the effect of muscular activity is **an increased activity of the organs of respiration and circulation**. From this it may be seen how the movement of the muscles directly exercises a rather important effect on the circulation, digestion, and respiration.

Furthermore, the products of combustion which are formed by muscular activity must also be carried out of the body. This is partly done by the lungs, from which the carbonic acid and water escape. But another and greater part is carried off by the kidneys and the skin. In this way the movement of the muscles is a cause of **an increased activity of the kidneys and the skin**. This is what takes place by the chemical process in the working muscle.

In every action of the muscle a mechanical process also takes place. When the muscle contracts, its mass is compressed to a greater density. All soft parts that are in or near the muscle



are placed under a stronger pressure. This fact is of great importance and significance for two other systems in the body, namely, the systems of blood vessels and lymphatics. In these vessels, which carry their contents toward the heart, the circulation is promoted only in part by the suction of the heart, wherefore, their contents are impelled in a high degree by incidentally acting pressure from without, there being valves at regular intervals to hinder the current from flowing backwards. This pressure acting from without consists for the most part in the pressure of the muscles in their contraction. In this way the action of the muscles promotes **an increased rapidity in the circulation of blood and lymph.**

But when the muscle contracts it also sets some part of the body in motion. In the voluntary muscular action one or more joints come into motion, so there is a friction of the articulating surfaces of the bones against each other, and the tendons and the parts in which they are fastened come into a greater or lesser tension. This is of great significance to the **nutritive process** in these parts. It may also be seen in persons whose muscles are very active that they are larger than in other persons, and that even the bones and tendons are coarser and stronger. A regulated movement of the body thus also involves an increased nutritive process and augmented strength, not only in the muscular system, but also in the osseous system, joints and tendons.

But muscular activity is not only a chemical and mechanical process; it is also a physiological act of great significance, and ought also to be regarded as such.

The voluntary movement is that which essentially distinguishes the animal from the vegetable. The more developed an individual of the animal world is, the more perfect will be the motive power. But this more perfect kind of movement is not brought about simply by a more perfect kind of motive organs, but also in a great degree by a higher developed nervous system. In man no apparent movement takes place without the help of the nervous system. Every voluntary conscious movement is regulated by the cerebro-spinal nerve system. We cannot set a single muscle into action without a part of our nerve system coming into activity. The mental act which we call will gives an impulse to a kind of activity in the nerve-cells of the brain. This activity is communicated from the brain by nerve fibres to the spinal cord, and is thence communicated by the periphery nerves to the muscles, which first through the influence of the nervous current contract. From this it may be seen that the expression of life, which we call movement or muscular activity, is by no means such a simple thing as its commonplaceness might lead us to think. It is, on the contrary, a complexus of several processes of the brain, spinal cord, nerves and muscles; and as the muscle by

its work directly and indirectly sets the blood current in motion, so it also sets the **nervous current** in motion. Yes, its influence here is, perhaps, still more important; for as the action of the muscle was an **important condition** for the exchange of matter in it, so the action of the nerve is also an **important condition** for a normal exchange of matter in the nerve. The voluntary muscular movement is thus of great significance for maintaining the normal condition of the **nervous system**.

We might add that the effect of this movement of the body is as well direct as indirect, and what was just said pertains to the motor nerves. But there are also **sensory nerves**, which communicate sense, and **central nerves**, which facilitate thought, imagination, and other functions of the brain. I dare maintain that the activity of the muscles exercises a healthy influence of an indirect sort even on this kind of nerves.

From time immemorial we have had in medicine a kind of remedy called revulsives. By means of these remedies healthy parts of the body are acted upon in order to divert or derive disease from infected parts. Not only in the system of circulation but even in the nervous system we have manifold instances where such a derivation can be accomplished. It has also its significance in the Movement Cure as far as concerns the nervous system, for it is no impossibility in many cases of morbid disturbances in the central nerve system or the sensory nerve system, that a beneficial effect may be gained by revulsion to the motory nerves. Considering all this, one may maintain on good grounds, that a regulated and properly used muscular movement has a strengthening effect on the nervous system, directly on the motory and indirectly on the central and sensory systems. There is, however, as was above mentioned, a great difference in the result of the regulated and methodical movements used in the Movement Cure and that of the active movements of everyday life.

I have thus far spoken of the general effect of the Movement Cure on the organism and its different systems, but it is often preferable to consider a **local effect** on certain parts or organs. Thus there may be certain muscles, certain nerves, certain joints which most need consideration, according to the disease in question. In local weakness, lameness, deformity, or the like, the movements are so regulated, that just those parts are influenced. If the circulation in certain parts is weak, for instance, in the hands or feet, then the local muscles of these members should be brought into activity, thus drawing the blood thither.

A local effect in the most restricted meaning of the word, can not, however, be brought about by the active muscular movement, on account of the intimate relation between the



different systems in the body. But for such a local effect, strictly speaking, the Movement Cure has still another and an important remedy in the form of passive movement and in manipulations.

These movements are more especially peculiar to the Movement Cure than the active muscular movements.

Certain manipulations of the body in the form of stroking, kneading, hacking, etc., have, to be sure, been used by most nations, especially by the more ancient civilized peoples, usually in connection with baths, as a restorative; but in modern times there was no systematic or methodical arrangement of passive movements before Ling took up their use in Sweden and arranged them even as he arranged the active movements, and localized their use.

Since a more elaborate description of these many movements and manipulations would be altogether too lengthy to be treated of here, I will only take up a few of them.

In order to render stiff joints limber we have passive rotations, passive flexions and extensions of the joints. To promote the circulation in a limited portion of the soft parts, we use rubbing, kneading, and other manipulations which are comprehended in the term massage. To produce an effect upon the nerves, we use different manipulations, such as stroking, pressing, hacking, pounding, vibrating, and shaking, according to the case in hand.

The few hints show what rich remedial resources the Movement Cure has for affecting different organs both generally and locally.

Furthermore, this cure can as perfectly as any other moderate its effect so that no one can be too ill or weak to make use of it. Bedridden patients are often treated by this cure. Lastly, the Movement Cure can even as regards the kind of its effect be adapted to different conditions of sickness. It can be brought to bear directly upon the diseased parts to cause a stronger vital activity, or to act as a sedative. In cases of great irritability (acute and sub-acute affections) it may also be used on remote parts as a means of derivation.

In these different methods of effect and use the Movement Cure agrees with the water cure, but it can more accurately localise its effect, and has also more abundant resources than the water cure. The former is, however, as the latter, essentially a tonic.

I will now enumerate the different kinds of diseases in which the Movement Cure may advantageously be used.

This is very easy to understand, for since the Movement Cure must be regarded as an eminently strengthening remedy, it must be preferable to use it in cases of debility.

A very large number, yes, the majority of chronic diseases, may be regarded as cases of debility in that either the organism as a whole or certain systems or organs in it are thereby weakened. There are a great many people in our days who suffer from diminution of working capacity and vital force, which is best characterised by the term **general debility**. Digestion is bad, the action of the heart is decreased, the activity of the lungs imperfect, nerves weak, the composition of the blood bad, and the patient is inclined to meagreness. That the exchange of matter throughout the whole body is disturbed is clearly proved by the usually weak, but sometimes, in proportion to the strength and flesh of the body, unnaturally increased appetite. The causes of this disease, so common in our days, may be many : Inherited tendencies from sickly and weak parents, profligate or unnatural habits of life, secret sorrows, and mental sufferings, overwork, or an idle life spent in ease and luxury. At all events, no remedy for such patients seems to be more natural and reliable than the **Movement Cure**, with its so powerful and deep-going, stimulating and strengthening effects. Closely related to this general debility is the common disease called *anæmia*, or green-sickness (*chlorosis*). Here it is a deficiency in the formation of blood which is the essence of the disease, from which all the ailments of the patient have their origin. These invalids with their many symptoms show only too well their need of a more copious, stronger, and better circulation in their blood-vessels. Now, since the **Movement Cure** is, as already shown, a strong excitant for the digestion and for the formation of the blood, it cannot be surprising that this disease should be very grateful for this method of treatment.

Among the diseases which are often related to the above mentioned condition, and which not unfrequently come under the treatment of the **Movement Cure**, is *St. Vitus's dance* (*Chorea Sancti Viti*). This disease, which finds expression in the inability of the will to govern the muscles which ought to be subject to it, causing the movements to be uncertain, imperfect, and irregular, seems by its very nature to be suited to, yes, even to **crave** the regular, anatomically and accurately adapted, measured movements and manipulations of the **Movement Cure**.

Another convulsive nervous disease, when it is of a peripheral nature, is not unfrequently suited for the **Movement Cure**, namely, the **writer's cramp**. I have treated several cases of this disease with good result ; but in order to attain this result the patient was obliged, in the beginning of the treatment, to leave off writing. This disease occurs frequently among telegraphic operators, violinists, pianists, etc. Both in Sweden and St. Petersburg I have had such patients. The **Movement Cure** is also especially suitable for

relieving cramps in the calf of the leg, which occur at night in weak and aged people.

Among the diseases of the central nervous system without any visible anatomical change, ought also to be classified a disease by no means uncommon, but whose nature is very little understood,—a disease not very fatal but very distressing,—called **habitual sleeplessness**. This term may, of course, only be applied to such sleeplessness as is not caused by any other disease of the body, and cannot depend upon any psychical conditions. The source of the disease is, however, generally derived from some such previous cause or from the misuse of narcotics. The older the disease is, the more difficult it is to cure, and very radicated cases defy, unfortunately, all treatment. This disease cannot, notwithstanding the difference of result in different cases, be regarded as otherwise than grateful for the Movement Cure, which has certain specific movements for this affection. Regarding the use of the Movement Cure for disturbances of the digestive organs, I may say that it is frequently advantageous in mild forms of **catarrh of the stomach** or dyspepsia, and, besides this, it is useful in treating repletion and congestion of the venous blood vessels of the abdomen (*plethora abdominalis*).

In chronic diseases in the small intestines and colon, the Movement Cure may also be used with advantage for habitual constipation, providing it is not caused by purely mechanical obstruction, but depends upon insufficient strength in the intestinal walls for the performance of the intestinal movement, or upon such a degree of weakness in the abdominal muscles that evacuation is rendered difficult. In either case the effect of the Movement Cure is of the greatest importance, and may be highly recommended. By passive movements and manipulations applied to the soft and yielding abdominal walls a vigorous effect on the intestinal canal may be had, and by active movements the abdominal muscles may be strengthened and caused to contract stronger and more perfectly, thus facilitating evacuation. This treatment is superior to the usual taking of mineral-water (*Marienbader, Homburg, Kissingen, etc.*), because the improvement gained by the Movement Cure is far more lasting than that gained by drinking mineral-water. Even chronic diarrhœa, when it is not caused by intestinal ulcers, cancer, or deep organic affections, but has its origin in the feebleness and lameness of the intestinal walls, has, although accompanied by chronic colic, a good remedy in the Movement Cure.

**Hemorrhoids** have, to be sure, of late years lost the attention which therapeutics once gave them, but they are, however, not infrequently a very troublesome symptom in a number of diseases of the pelvic organs, in cases of bad circulation and general stasis, in obstruction, etc. Hemorrhoids are



characterised by dilated veins around the margin of the anus, and in the nearest portions of the rectum, sometimes forming hard pendant masses, which are rendered painful during defæcation, and are often protruded by hard excrements. In this disease anal massage is of great importance, by which treatment these tumours may be resorbed. In the countries where the Swedish Movement Cure has been introduced, this is now a recognised fact, and hemorrhoids are now treated in many places with excellent result by this manual method, in which especially anal massage occurs as a specific movement.

Dr. Wide, of Stockholm, tells of a man 70 years old who had good health till his 68th year, when he was attacked by a slight apoplectic shock, which, however, disappeared in a few days without leaving any serious results. The activity of the heart was weak and irregular, suggesting atheromatous changes. After the apoplectic attack he was, however, frequently troubled with vertigo; his appetite was good, but evacuation sluggish, which must be helped by abdominal massage. He had been troubled with hemorrhoids ever since his youth. After the apoplectic attack they became worse, probably in consequence of intestinal atony. When the treatment was begun in 1887, he had several protuberances around the margin of the anus about the size of an almond, and numerous varicose tumours in the lower extremity of the rectum, besides the troublesome subjective symptoms which accompany this affection. He was given anal massage daily for six months, although after three or four months he was perfectly free from his hemorrhoids; and this treatment had, furthermore, so good an effect, that for the next five years he was never troubled with hemorrhoids. He has, however, every year since, used the Movement Cure to preserve the normal activity of his heart and intestines. The patient, who is a very intelligent man, thinks himself that he is indebted to this treatment, for being, at the age of 76, able to continue with five hours of very trying office work daily. I have, myself, treated several patients troubled with hemorrhoids, and by means of direct massage caused them to disappear in from one to three weeks. Although anal massage may be said to have a direct effect upon the hemorrhoids, this effect ought to be supplemented by abdominal kneading, in order to relieve temporary costiveness, and by revulsive movements of the legs, in order to diminish the quantity of venous blood in the pelvic region, and thus, also, in the dilated hemorrhoidal veins. In many cases one need not give the anal massage on the bare skin, but on the outside of the linen. It is undoubtedly the best and least dangerous remedy for hemorrhoidal tumours. The operative treatment can only be performed in some certain cases of hemorrhoids, and is, even then, not advisable under all circumstances, for instance, in old age. At all events, the pain-



less and perfectly harmless anal massage ought first to be tried.

### Inflammation of the blind pouch (cæcum).

This disease has, in the Movement Cure, formerly been a *noli me tangere*, and is to a certain extent yet, but I have myself had an opportunity in St. Petersburg of treating a few cases after the acute stadium was entirely passed, and I must say that the result was especially satisfactory. If there is suppuration manual treatment may not be used. Thus, even after real typhlitis, an adhesion may not be detached before the intestinal wall is completely healed.

Dr. Levin, of Sweden, has advanced more boldly than I in the treatment of this disease, and I shall consequently cite his statement in regard to it. He gives an account of nine cases which he has treated with the best result, frequently preventing a relapse. In one case the massage was begun on the fourth day, while the soreness was still great, and there was fever ( $38.1^{\circ}$ — $39.1^{\circ}$  Celsius). The treatment began with a very fine vibrating just above the tender spot,—first day, five minutes; second day, fifteen minutes.

Another case (temperature  $38^{\circ}$ — $39^{\circ}$  Celsius), vibrating ten minutes, followed by ice and morphine; treatment repeated 2—3 times daily, 15—20 minutes at a time. On the second day the ice and morphine was omitted.

A violent relapse with pain and great soreness (temperature  $38.3^{\circ}$ — $40.1^{\circ}$  Celsius), ice, morphine, opium. As early as the second day the manual treatment was begun, with an extremely light vibration twice daily. On the seventh day the attack had disappeared.

A second relapse: first day two manual treatments, after which ice and opium were not needed, only half-an-hour's treatment. On the fifth day the patient could get up.

It is undeniable that a well administered manual treatment immediately brings a great alleviation to the patient. But this treatment requires an accustomed hand which can administer the manipulations with a fine touch.

### Diseases in the Organs of Circulation.

It has been more and more demonstrated and recognized, both by the medical corps and by the public, that no other treatment has, in the long run, as advantageous an effect in diseases of the organs of circulation, as the Swedish Movement Cure, even as regards the heart itself. This treatment has the faculty of increasing the afflux of blood to certain parts of the body, for instance, to divert it from the head, extremities, and abdomen; to relieve the venous stagnation of blood, and in general to regulate the circulation of blood in the body.

In every treatment of heart disease, it is the object of the Movement Cure to facilitate the action of the heart by

improving the weakened circulation, which is best accomplished by diminishing the congestion of the venous system. The Swedish Movement Cure has fortunately three large groups of passive movements and manipulations which have such an effect, namely, **kneadings, rotations, and respiratory movements**. The two former divisions promote circulation in the more peripheric parts of the body, the third group or respiratory movements promote it in the thorax. For the abdominal cavity abdominal kneadings are of important significance. Muscular kneading promotes the flow of venous blood to the heart, in that the venous blood by the compression of the muscle is pressed onward in the veins toward the heart. This diminishes the resistance of the blood-vessels to the action of the heart in forcing the arterial blood to the peripheric parts of the body. Abdominal kneading is not given here, as is usually the case, to promote digestion, but to promote resorption, since in heart disease in general, and especially in defect of the heart-valves, there is a considerable congestion in the digestive organs. In abdominal kneading a mechanical irritation is imparted to **nervi splanchnici**, which causes a contraction both of the arterial trunks of the abdomen and the venous trunks, **vena cava inferior** and **vena portæ**.

The passive rotation of the shoulder-joint and the hip-joint is of special importance, for it causes a strong suction in the large veins which lie in the neighbourhood of these joints; rotations of the trunk act most upon **vena cava inferior** but also in part on **vena cava superior**.

The influence of respiration on the circulation is tolerably well known. Its most important function is to oxygenize the blood, and since heart disease is always accompanied by weakened circulation, the oxygenization of the blood will be imperfect in the same degree as the heart disease is severe. It is thus important that the patients troubled with heart disease should be treated with respiratory movements, in performing which they should learn to make their respirations as perfect and as deep as possible.

But it is not the only function of the thorax to take in air, but to act on the circulation, which is promoted by deep inspirations, especially in the lesser or pulmonic circulation, that is in the passage of the blood through the lungs. But the deep respiration influences the large vein trunks that belong to the greater or systemic circulation. Inspiration increases the negative pressure in the thorax, by which a powerful suction toward the heart takes place in both of the **venæ cavæ**.

The diaphragm in its contraction during respiration expands **vena cava inferior**, and by simultaneously bringing a pressure to bear on the organs of the abdomen, presses the blood from these into the veins. The suction toward the heart in

**vena cava superior** caused by inspiration re-acts in its turn, not only upon the larger veins of the upper body, but upon **ductus thoracicus** and the lymphatics.

But besides these respiratory movements, the Swedish Movement Cure has still another group of manipulations which exercise a **sedative** effect on an over-excited activity of the heart, and which consist of light vibrations and shakings of the thorax, and pressure of the spinal nerves. We have, however, in the Swedish Movement Cure, local manipulations by which we can exercise not only a **sedative** effect on the activity of the heart, but even such as have a **stimulating** effect. It has been found that by means of these movements the increased activity of the heart may be diminished 10 to 20 or even 30 beats, as also in the opposite case it may be increased.

Dr. Astley Levin, of Sweden, has made and published a whole series of investigations in regard to the effect of these movements on the activity of the heart; and I will give an excerpt from the tables he has published showing the results of the investigations he has, during ten years, made in cases of organic heart disease. These tables show, in the first place, how the separate specific movements influence the rhythm of the action of the heart, and, in the second place, how the Manual Movement Cure, taken as a whole, influences the activity of the heart. This is the result of 6,000 reckonings. The causes of the heart disease have been various: inherited, arising from rheumatic fever (the majority), from scarlatina, etc. The age of the patients has varied between seven and sixty years. In his investigations he has taken the following course:—

1.—He always counted the pulse a few days without making a note of it, in order to accustom the patient to the procedure, thus avoiding the excited action of the heart which generally occurs in unaccustomed patients.

2.—He took the pulse three times, viz.:—

- (a) Before the treatment, but a while after the patient's arrival, so that the heart had had time to quiet down after the exercise of walking.
- (b) Immediately after some certain movement in the treatment.
- (c) A while after the whole treatment.

3.—After noting the total result of ten days, reckoning and averaging it so as to diminish, as far as possible, the disturbing effect of incidental causes.

The effect of the treatment, as a whole, is shown here in some of the 22 cases which Dr. Levin noted in his investigations.



TABLE I.

The pulse before and after a certain time of treatment.

Name of Patient.	Age.	Pulse on Arrival.	Duration of Tr'tm't.	Pulse at the end of the Treatment.
E. E.	21 yrs.	112	1 m'th.	96
H. W.	22 „	140	3 „	88-84, before and after the day's treatment.
A. K.	11 „	100	2 „	90
M. J.	26 „	100	2 „	80-60 „ „
I. W.	21 „	84	1 „	74-70 „ „
L. D.	20 „	90	1 „	77
A. G.	28 „	90	2 „	70

TABLE II.

Showing the gradual falling of the pulse after a certain time of treatment.

Name.	Date.	Pulse before and after the Day's Treatment.	Name.	Date.	Pulse before and after the Day's Treatment.
C. G.	11/1	120-112	B. H.	11/1	92
	29/2	105-96		4/2	88-80
	12/3	102-91		17/3	82-73
	11/4	100-98		30/4	80-71
	28/4	101-91			



TABLE III.

Showing the pulse before and after certain specific movements.

Specific treatment of the Heart.		Vibration of the Thorax.		Rotation of the Arm.		Kneading of the Abdomen.		Kneading of the Arm.		Pressure on the Spinal Nerve.	
81.2	67.4	82.8	73.6	80.0	78.5	113.2	95.8	79.0	68.0	80.6	75.6
91.6	83.2	100.0	92.0	88.3	82.2	104.0	90.0	107.2	99.0	86.6	74.8
107.2	90.0	87.6	81.0	82.0	76.6	84.0	64.6	85.4	77.6	88.2	73.0
123.8	97.6										

The conclusions which we may draw from these investigations are :—

- 1.—That the pulse is slower after a rational day's treatment.
- 2.—That the pulse during a more lengthy treatment becomes slower, and that this retardation is greatest at the beginning of the treatment ; that the pulse again becomes more rapid if the cure is suspended, but soon becomes slower on resuming the treatment.
- 3.—That certain specific manipulations are more conducive to a diminution in the rapidity of the pulse : thus, for instance, specific vibration of the heart (600 observations) 8—12 beats per minute ; abdominal kneading (140 observations) 8—10 per minute ; pressure on the spinal nerve (200 observations) 7 per minute, etc.

Among other symptoms which were ameliorated by the Movement Cure may be mentioned **cyanopathy** or blue jaundice, which, as a rule, rapidly disappeared, ecchymosis occurring periodically, have, after a certain time of treatment, disappeared and not returned again ; œdema disappears rapidly, frequently after only a few days' treatment ; as to the blowing or vibrating murmurs, on the contrary, they have not usually undergone any change.

That the symptoms of troublesome palpitation of the heart, asthma, etc., disappear with a greater or lesser degree of rapidity, is an experience shared by all who have used the Movement Cure for heart disease.

In Sweden, where a large number of cases of heart disease have already been treated by the Movement Cure, confidence in this mode of treatment has increased every year, so that the number of patients suffering from heart disease who make use of this mode of treatment has yearly been increased. During my practice in St. Petersburg, I tried to use this treatment for

heart disease, but since most of my medical colleagues at that place, who treated this disease, were not well-disposed toward the cure, the number of such cases which I had the opportunity of treating was not very large; but, on the contrary, I have since then, in Stockholm, treated several such cases, both with and without defect in the valves.

Dr. Wide, of Stockholm, who there owns a large institute devoted to treatment by the Swedish Movement Cure, has had an opportunity of treating quite a large number of patients suffering with heart disease. He says, "As a general rule, in treating heart disease by the Swedish Movement Cure, the treatment ought to be given once a day, and ought to be continued for some length of time, three months at least." Since the action of the heart is made easier by the cure, heart disease ought, to a certain degree, to be helped by this treatment. This ought, preferably to take place in diseases of the muscular tissues of the heart, for instance in fatty degeneration, the heart being strengthened by the treatment. But if the heart disease itself can in no case be said to be cured by this treatment, and only in a few cases even be helped, I dare, at all events, maintain, by reason of the experience which I have gained during many years of practice, that every patient suffering with heart disease experiences an alleviation in the troublesome symptoms—palpitation of the heart, shortness of breath, pain and oppression over the heart, &c.—always accompanying heart disease, and much is already gained by accomplishing this. It is true that the improvement is not in every case lasting; the treatment must frequently and for a long time be repeated; but it ought also to be remembered that in such cases the disease is chronic and that no other treatment will give as good or a better result. I know many sufferers from heart disease who year after year continue to use the Swedish Movement Cure, and by so doing keep up and continue to be active, while they would otherwise be doomed to an inactive life, and in many cases, perhaps, to constant confinement to the sick bed. No cure has such a beneficial influence upon organic heart disease as the Movement Cure.

Dr. Wide says, in regard to Oertel's cure, "I ought to mention Oertel's cure, so highly praised as a means of treating heart disease, since as a purely mechanical means it much resembles the Movement Cure. As is well known, Oertel's cure is intended to improve a weakened circulation in cases of heart disease, by walking on more or less inclined roads, thus active movements of the legs, in addition to which comes an item which is, to be sure, of importance, but one upon which altogether too much stress is laid; namely, that the promenade takes place in the open air. So far as I have been able to judge correctly of the matter, Oertel's cure ought to be

of use especially in cases of fatty degeneration of the heart and a few neuroses of the heart, but not in cases of severe valvular disease. For several summers I have been able to compare the effects of the Swedish Movement Cure and Oertel's cure at a Swedish watering-place called Soderkoping, where I found it possible to arrange excellent cure-roads, and feel, therefore, confident that I am justified in saying that the latter cure should be confined to the above-mentioned diseases. The Swedish Manual Movement Cure has the great advantage that it is capable of having the kind, quantity, and duration of the treatment very accurately fixed, and that one may constantly superintend the treatment and see its effect, something which, in cases of severe heart disease, is absolutely necessary. This treatment can, furthermore, be administered to bedridden invalids, and even then with success. By means of this manual treatment I have succeeded in getting on their feet no small number of patients suffering from heart disease, after they have been confined to their beds for many months, and the medical treatment has proved to be capable of doing little or nothing for them. In such cases it would be impossible to prescribe Oertel's cure. Finally, it would perhaps be as well to call attention to the fact that the Swedish Manual Movement Cure, as well in heart disease as in other diseases, does not exclude the simultaneous use of medical treatment, and that both should sometimes be used in order to give the patient the greatest possible benefit."

Even in diseases of the pericardium the manual treatment has advantageously been used. In St. Petersburg I have treated a few such cases with satisfactory results.

Dr. Wide describes, among others, such a case of exuding pericarditis in a man forty years old, which he treated with the Manual Movement Cure at Stockholm in 1886.

The patient had had a very severe and long run of articular rheumatism, accompanied by effusion in several joints, in both pleuræ, and finally in the pericardium. The effusion remained persistently in the pericardium, although the patient improved in other respects, even after the exudation in the pleuræ had begun to diminish. The patient was confined to his bed and still had a slight fever when the manual treatment was begun.

Besides massage on the swollen joints and movements for promoting circulation, such as passive rotations and muscular kneadings of the extremities, there were given with special regard to pleuritis and pericarditis a few resorbing special movements which accelerated the resorption of the exudation, since it had thus far advanced very slowly. As soon as he had become so much better that he could leave the bed, still more respiratory movements were added. He was treated about an hour daily for four months, and was at the end of this time completely recovered.



If we now pass on to the **respiratory organs** we find also in the lungs cases of debility in which the Movement Cure is, apparently, highly in place. The Swedish Movement Cure has also a great prophylactic significance in affections of the **respiratory organs** and the thorax, for it expands a sunken thorax and develops the respiration to a normal perfectness, partly by the development of the elasticity and contracting capacity of the respiratory muscles, and partly by training the lungs to fill properly with air. Frequently cases of suspected **phthisis incipiens** have been subjected to treatment, in which have been found symptoms of weakened, jerky, or spasmodic respiration, a shorter percussive sound over the apices of the lungs, sunken thorax, etc., and the patients have, almost without an exception, found themselves much benefited by the treatment.

In more advanced cases where unmistakable signs of induration or initiative consumption of the pulmonary tissue (parenchyma) are present, the direct treatment of the thorax ought to be avoided, but by muscular kneadings and other movements an attempt may be made to increase vital activity and improve the general condition.

The following diseases of the respiratory organs deserve to be more closely considered as suitable for treatment by the Movement Cure:—

**Chronic bronchial catarrh** has often derived a beneficial effect from the manual treatment, since this treatment includes movements for making respiration deeper and fuller, and also such as facilitate the loosening of the phlegm from the mucous membrane of the bronchial tubes, and promote expectoration.

**Pulmonary emphysema**, in which the elasticity of the lungs or their contracting power is considerably diminished, has been treated with especially good results by the Swedish Movement Cure. Since the diminished contracting power of the lungs is most noticeable during expiration, this will be imperfect in emphysema and the exchange of air in the lungs diminished, in consequence of which shortness of breath arises. Through the diminution of the pulmonary tissue and the capillaries, the surface on which the blood is to be oxygenised is also reduced. These disturbances, both in the respiration and circulation, cause the patient to be "air-hungry."

The respiratory movements are in this disease of the very greatest importance, since the breathing is always partial and the exchange of air is imperfect. No treatment can, under such circumstances, have such an important effect as the Swedish Movement Cure in facilitating both expiration and inspiration. Although it is of utmost importance to strengthen weak expirations, the majority of respiratory movements are also beneficial, since deeper inspirations must necessarily be accompanied by more perfect expirations.



The exchange of gas in the lungs will thus be greater and the oxygenization of the blood in the same degree more complete. In order to increase the elastic powers of the lungs, the Swedish Movement Cure has several specific movements which directly influence expiration.

In St. Petersburg I have treated quite a number of cases of emphysema which were handed over to me by three among the most eminent doctors of St. Petersburg at that time,—Dr. Botkin, Dr. Eichwald, and Dr. Besser, all professors of the medical academy there. First Dr. Besser advised two of his patients to try my method of treatment. Since the result of the treatment of these patients was especially satisfactory, in that they were in a high degree relieved from their symptoms of shortness of breath (*dyspnœa*), he sent me still more patients, and told his two colleagues of the favourable result of my treatment; thus they also sent me patients with the same affection, and I treated them with the same satisfactory results. In consequence of this, other doctors also sent me patients suffering from emphysema.

But such a treatment ought to be continued regularly for some length of time, and even be resumed if the troublesome symptoms return, for it is clear that the lungs cannot regain their normal condition, but after the cessation of the cure the exchange of air often becomes gradually more imperfect again, if the patient does nothing to keep up a continual improvement; but much is already gained if the patient can, while using the cure and for some time after, be relieved from the troublesome symptoms. As a subsequent treatment in cases of croup-like pneumonia, exuding pleuritis, and pleuro-pneumonia the manual treatment is one of the most grateful methods of treatment, and has among many physicians in Sweden and Russia, as well as in other countries, gained a recognition for its specific beneficial effects. In most cases the manual treatment was begun after the fever had completely disappeared, but in many cases already while there was induration and exudation accompanied by fever. The beneficial effect of this cure is best noticed in cases of pneumonia where the resolution has taken place slowly and incompletely, and in cases of pleuritis where the symptoms have been delayed. As long as adhesions between the *pleura pulmonalis* and the *pleura costalis* remain, respiration will always be superficial and incomplete, and the patient is troubled with shortness of breath and even with pain in breathing. No remedy will so surely remove these symptoms as the manual treatment. The Movement Cure, generally, even shortens the period of convalescence, especially if the treatment is begun before the patient has been able to leave the bed.

I beg to draw particular attention to one affection which is rather painful, and only to be removed by manual treat-

ment, viz.:—**cellulitis**. It might be supposed that this disease consisted of an œdema in the connective tissue, either concentrated into more extensive parts, or divided into smaller inflations independent of each other, and varying in size from miliary grains to very hard nuts, and limited to a great number of or only a few fat lobes. This œdema is probably due to some vasomotorical cause.

This affection is in Sweden very common among both men and women. The most common place for these inflations are the scalp, the upper arms, and the inside of the thigh. The symptoms vary in different parts of the body. Cellulitis on the scalp, produces strong pressure across the vertex, and headache. On the extremities it calls forth the same symptoms as rheumatic myitis, and when it is localised in the gluteal region, it may be taken for sciatica. On the chest it may resemble a dry pleurisy, or still more, an affection of the heart. It is common to find that the patients believe they have contracted some form of heart disease. They suffer from a peculiar anxiety and uneasiness; heart beating and dyspnœa are present to a certain degree, and the painful sensations in the region of the heart are supposed to come from the heart itself. This sensation in the cardiac region, caused by cellulitis, often produces a melancholy frame of mind. Cellulitis in the epigastrium is often mistaken for chronic gastric catarrh, and its occurrence in the lower part of the abdomen in women may simulate oophoritis.

In the preceding pages I have spoken of the internal affections, which according to experience and theory are best suited to the Movement Cure, and the majority of which are chronic, for till recently it was a common supposition that the Movement Cure was only adapted to chronic diseases. This doctrine has, however, of late been overthrown by more recent experience, especially by the development of massage by Mezger. He has by the indisputable proof of experience shown that several **acute** diseases of the joints, muscles, and nerves may be treated with the greatest success by passive movements. Yes, they are far more susceptible to treatment as **acute** than after they have gone into a **chronic** stage. This opinion has now also been fully confirmed, and is generally recognised among physicians in nearly all countries. The treatment of diseases of the joints by means of the Movement Cure has of late years gained an extensive use and great confidence through the successful cures that massage has in different cases been proved able to perform. In Russia I was the first to call the attention of physicians to this method of treatment, partly by means of articles in the St. Petersburg medical journal for 1875 and partly by means of a pamphlet which I published on this subject, communicating the experience which I had had in applying this treatment to several



acute affections of the joints and muscles. At first there was little inclination for this treatment, but the results gained by the treatment attracted considerable attention and procured more and more adherents to the method, which is now more generally used there, not only in hospitals but even in private practice. It was especially gratifying to me that my work was so widely known and acknowledged that even Queen Olga of Greece, while visiting St. Petersburg a few years ago, had me summoned to her and asked my advice as to how massage could best be introduced into the hospitals of Greece.

It cannot but be acknowledged as a great advantage to mankind and medicine that it has been successfully proved that a large number of **both acute and chronic** diseases of the joints can be more speedily and more certainly cured by passive movements than by any other means. The diseases belonging to this category are all those which occur in the **synovial membrane** with the quantitative and qualitative changes of the synovia attending them, and those occurring in the ligaments and capsular ligaments. On the other hand, diseases of the bone and cartilage cannot be cured by this treatment. **Sprains, synovitis, chronic tumor albus** and many affections brought on by them, and entailing more or less stiffness of the joints, are the most common diseases of the joints which with hope of success may be treated by the Movement Cure.

The principle of this treatment in such cases is by means of passive movements, rubbing, kneading, &c., to produce the absorption by the lymphatics and capillaries of exudations of newly formed tissue, and other products of disease (with the exception of pus), which one tries at the same time to disintegrate and eradicate in a purely mechanical manner. That this is an actual possibility is proved by the fact, that in cases of short standing, for instances in effusions of the joints, during one single treatment of about half-an-hour, both a visible and measurable diminution of the circumference of the joint may be ascertained. The older the disease is and the more solid and hard the newly formed tissues are, the more difficult the case is to cure.

Both **muscular rheumatism and inflammation of the muscles (myositis)** are affections which we are frequently called upon to treat by means of the Movement Cure, and in the treatment of which this cure gives the most satisfactory results. Many neuralgic affections are often eradicated by the Movement Cure, as, for instance, sciatica and lumbago, even when other remedies have been used in vain.

Among the external chronic affections there are several which so obviously **crave** treatment by the Movement Cure, that medicine has from antiquity referred them to mechanotherapy, even though the mode of this cure's application was



then different than it is now in the scientifically arranged Movement Cure. Such an affection is **curvature of the spine**.

All curvatures may have their origin either in the skeleton itself or in a weakness of some of the muscles and ligaments that serve to hold the spine upright.

The former group of curvatures cannot be cured by the Movement Cure, but in such cases **external** artificial support by means of bandages (orthopedic treatment) are sometimes useful in keeping the spine straight.

In the latter group, where the origin of the curvature lies in the weakness of certain muscles, the Movement Cure is perfectly in place.

The curvature of the spine to one side (**scoliosis**) has essentially two different forms—the single or C-shaped and the double or S-shaped. The former has the convex curvature only on one side and is much more readily cured than the latter, in which the convex curvature is first on one side and then on the other. It takes much longer to cure the latter, and if the curvature is great it may only be helped but not fully remedied. If the curvature is of a purely muscular nature, and is treated by the Movement Cure carefully conducted, bandages, orthopedic waists and beds are usually unnecessary. If, on the contrary the affection originates in or depends upon diseases of the osseous system, then orthopedic supporters may, to be sure, hinder the further development of the curvature, but will seldom cure it. But even in deformities of a muscular nature the orthopedic treatment may be in place as a palliative, in case the patient has no opportunity to avail himself of a proper treatment by the Movement Cure.

**Congenital lameness**, may be of several kinds, entailing greater or lesser malformation, and if of the foot, this deformity requires both surgical and orthopedical treatment, and also a subsequent treatment by the Movement Cure.

Many who are not well acquainted with the Movement Cure may think that I have claimed for it too extensive a scope in the treatment of internal and external, chronic and acute diseases, but experience is the most competent judge in this matter; and I have only stated that which is confirmed by experience. But I admit that it may be relatively difficult to determine the limits of the remedial effect of the Movement Cure, for the true worth of every remedy depends not only upon its own immanent nature, but also in a very high degree upon the manner in which it is administered. And this rule is by no means least applicable to the Movement Cure. This is frequently forgotten, however, not only respecting this cure, but in regard to other cures also. If a patient has become worse instead of better through the use of the water cure, he is prone to say, "the water cure isn't the right

thing for me." But it is, nevertheless, in many cases probable that it was not the fault of the water cure that the patient did not get better, but the fault of the doctor, who did not know how to choose the best method of using the water in this special case. And still the methods of the water cure are not so multiform and complicated as those of the Movement Cure. Thus the manner in which the treatment is administered is still more important in the latter cure. In the application of the Movement Cure it is by no means enough to know all the movements which are used in the cure, and what effect they are supposed to have, and to be able to make a diagnosis of the case, although this is of much value. It is also necessary to have a concise conception of the individual case in hand, that is, of the stadium of the disease, of its most prominent symptoms, the character of the patient's constitution, and even his temperament and individuality. Or in other words, treatment in the Movement Cure must be adapted to the patient (be individualised), not only as to the kind of the movements, but also as to their arrangement and degree of strength, and sometimes even as to the manner of their administration. A doctor who gives medicine can in many cases write out a prescription for a patient if he can ascertain what the disease is (for instance, chlorosis), the patient's age, &c., without seeing him or talking with him. Even a water-cure doctor can, without seeing the patient, frequently prescribe the treatment so that any one may administer it. This is far more difficult to do in the Movement Cure, for it is necessary to know not only the disease, but also all the symptoms, the patient's strength and power of endurance in performing the movements, &c. Thus I am of opinion that in no other cure does so much depend upon the manner in which it is administered as in the Swedish Movement Cure. Therefore if I cannot cure a patient by means of this treatment, it does not by any means necessarily follow that another cannot cure the same patient by this cure. I have also seen the most differing methods, the greatest difference in skill and ability, and the most varying results in the application of this treatment. And still all must be said to be the Movement Cure. Here more than in any other branch of the healing art is there the greatest diversity under the same name.

The causes of this are quite manifest. In the first place no other cure is so destitute of scientifically acknowledged and really good literature, in the second place no cure is like this practised by persons with such varying degrees of medical knowledge, and in the third place no cure (with the exception of the surgical) is like this so dependent upon the skill of the hand that administers it, since the treatment is a manual one.

A list of the diseases in which the Movement Cure is either the best remedy, or gives a very satisfactory result, ought not to be out of place here.

In all cases of debility, general or local.

In the stadium of convalescence in anæmia, chlorosis, chorea sancti viti, writer's cramp, chronic cramp in the calves, habitual sleeplessness, cellulitis.

In disturbances in the digestive organs: chronic catarrh of the stomach, dyspepsia, costiveness, hemorrhoids, and as a subsequent treatment in inflammation of the blind pouch.

In diseases of the organs of circulation: organic heart-disease (hypertrophy, valvular disease, fatty degeneration of the heart) and as subsequent treatment in exuding pericarditis.

In diseases of the respiratory organs: chronic bronchial catarrh, emphysema of the lungs; as subsequent treatment in pneumonia, exuding pleuritis, pleuro-pneumonia, and in tendency to consumption.

In acute and chronic affections of the joints: distortions, sprains, synovitis, tumor albus, and chronic articular rheumatism.

In muscular rheumatism, acute and chronic muscular inflammation (myositis), sciatica, lumbago, simple muscular scoliosis.

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## CONTENTS.

Of what does the Movement Cure (Mechanotherapy) consist?

The physiological effect of the Movement Cure.

What diseases may be preferably treated by means of the Movement Cure?

Conditions for the successful treatment of diseases by means of the Movement Cure and its limits.

*Dr. Berglind is assisted in the treatment of ladies and children by a Swedish lady, who is also a specialist in this profession.*











